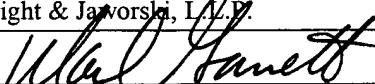
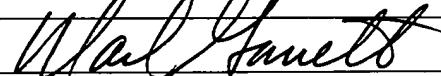
 Total Number of Pages in this Submission: _____		Application Number:	10/077,618		
		Filing Date:	February 15, 2002		
		First Named Inventor:	Alexander J. Feigl		
		Art Unit:	3731		
		Examiner Name:	Bradford C. Pantuck		
		Attorney Docket Number:	AFEI:002US		
<b>ENCLOSURES (check all that apply)</b>					
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> References _____  <input type="checkbox"/> Certified Copy of Priority Documents  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts/Requirements <input type="checkbox"/> Declaration(s) _____ <input type="checkbox"/> Copy of Notice of Missing Parts/Requirements	<input type="checkbox"/> Drawings(s) _____  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Statement under 37 CFR §3.73(b) <input type="checkbox"/> Designation of Patent Practitioners  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)			
		<input type="checkbox"/> Check in the amount of \$ _____ <input checked="" type="checkbox"/> Authorized to be charged to deposit account if check insufficient or inadvertently omitted Deposit account number: <u>50-1212/AFEI:002US</u>			
		<input type="checkbox"/> Sequence Statement <input type="checkbox"/> Paper Copy of Sequence Listing <input type="checkbox"/> Computer Readable Form (CRF) <input checked="" type="checkbox"/> Postcard <input type="checkbox"/> _____ <input type="checkbox"/> _____			
		Remarks:			
		<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
		Firm Name	Fulbright & Jaworski, L.L.P.	Customer Number	32425
		Signature			
		Printed Name	Mark T. Garrett	Reg. No.	44,699
		Date	June 29, 2005		

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